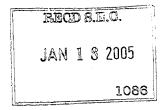


FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	age burden
hours per respo	nse 16.00

SEC US	E ONLY
Prefix	Serial
DATE R	ECEIVED
1	

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Southern Cross Latin America Private Equity Fund II, L.P. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ ULOE 125881
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	<u></u>
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Southern Cross Latin America Private Equity Fund II, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	MADOLOGED
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	olease specify): JAN 19 2003
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 677d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only reporthereto, the information requested in Part C, and any material changes from the information previously supposed be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for subcompany that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	xemption. Conversely, failure to file the ess such exemption is predictated on the

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

195g

			A. BASIC ID	entification data		
2.	Enter the information re	equested for the fol	llowing:			
	• Each promoter of	the issuer, if the iss	suer has been organized w	ithin the past five years;		
	 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
	• Each executive off	ficer and director o	f corporate issuers and of	corporate general and mar	aging partners of	partnership issuers; and
	• Each general and	nanaging partner o	f partnership issuers.			
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
r	Nimi d'un income de la l	(F) (-1) (-1)				
run	Name (Last name first, i	it individual)				
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·	
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)				
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Fuli	Name (Last name first,	if individual)				
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		<u>, , , , , , , , , , , , , , , , , , , </u>
Chec	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)				
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Chec	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)			·····	
Busi	ness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full	Name (Last name first,	if individual)				
Busi	ness or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
		(Use bla	ank sheet, or copy and use	additional copies of this s	heet, as necessary)

	A. jan		200		В. П	NFORMAT	ION/ABOU	T ÖFFERL	NG 1		7.0		
1.	Has the	issuer sold	l, or does th	ne issuer ir	ntend to se	ll. to non-a	ccredited i	nvestors in	this offeri	no?		Yes	No □
			,			Appendix.				·-		اسا	نے
2.	What is	the minim	um investn					-				\$	
												Yes	No
3.			permit joint		-								
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (l	Last name:	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	I Street, C	ty, State, Z	Lip Code)		ur sagara				
Na	me of Ass	sociated Br	oker or De	aler		· · · · · · · · · · · · · · · · · · ·						<u> </u>	,
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	***************************************		*******	*********			☐ All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC]	FL	GA	HI	ID
	IL D	IN N	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
			C 101. 41						· <u> </u>				
rui	i Name (i	Last name	first, if indi	(Vidual)								•	
Bu	siness or	Residence	Address (1	Vumber an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	sociated Br	oker or De	aler			· <u>-</u>						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		<u>, , , , , , , , , , , , , , , , , , , </u>				
	(Check	"All States	or check	individual	States)			••••••••••	***************************************			□ All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if ind				لشنا						
	riume (11135, 11 111d)										
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of Ass	sociated Br	oker or De	aler			<u></u>				***************************************		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	•••••			****************	***************************************	······	☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[D]
	IL	IN	IA NV	KS	KY	LA NM	ME	MD	MA	MI	MN	MS	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	UT	NY VT	VA	ND WA	OH WV	OK WI	OR WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE: NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		A A large de
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	<u>\$</u>
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests	\$ 250,000,000.00	\$ 217,159,795.00
	Other (Specify)	\$	\$
	Total	<u>\$_250,000,000.00</u>	\$ 217,159,795.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 217,159,795.00
			Ψ
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	21	\$ 217,159,795.0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3,	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_195,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) filing fees and miscellaneous		\$ 5,000.00
	Total		\$ 200,000.00

	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS		\$_	249,800,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used feach of the purposes shown. If the amount for any purpose is not known, furnish an estimate at check the box to the left of the estimate. The total of the payments listed must equal the adjusted groproceeds to the issuer set forth in response to Part C — Question 4.b above.	ıd			
			Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees		\$	П	\$
	Purchase of real estate			_	
	Purchase, rental or leasing and installation of machinery			ب -	
	and equipment	[] \$	- 🗆	\$
	Construction or leasing of plant buildings and facilities	[] \$. 🗆	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)				
	Repayment of indebtedness] \$	- 🗆	\$
	Working capital	[] \$	- 🗆	\$
	Other (specify): Management fees and investment in securities	_ 🗹	\$ 21,700,000).(Z	\$ 228,100,000.
		- [_] \$	_ 🗆	\$
	Column Totals	Z	\$ 21,700,000	.0 Z	<u>\$ 228,100,000</u> .
	Total Payments Listed (column totals added)		⊘ \$ <u>²</u>	49,8	00,000.00
	D FEDERAL SIGNATURE	der i			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this not nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Communication furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	niss	ion, upon writt		
	uer (Print or Type)		ate Jamualy 1	3	2005
	m Cross Latin America Private Equity Fund II L.P.		iamouty .	<i>J</i> /	2003
	me of Signer (Print or Type) Title of Signer (Print or Type)				
ริกม	ithern Cross Capital Partners II (General Partner) Ricardo Rodriguez, Managing Member of S	COLIT	hern Cross Ca	nital	Partners II

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)